

NATIONAL ALCOHOL AND DRUG ADDICTION RECOVERY MONTH EVALUATION FORM

Hundreds of communities and organizations nationwide are celebrating and promoting addiction recovery during the month of September. In an effort to compile information on these activities, we would like to know as much as we can about your efforts during *National Alcohol and Drug Addiction Recovery Month*. This information will be used to determine the usefulness of these materials and is essential to ensure the continuation of this national treatment initiative. It will also help the Center for Substance Abuse Treatment plan for future outreach materials. Please take a moment to fill out this questionnaire and return it by Wednesday, October 31, 2001, to the address listed below. We encourage you to provide photographs and/or samples of supporting materials.

Name	Title
Organization Name & Address	Phone & Fax Numbers
Please provide a brief description of your event or major activities.	
Did you receive media coverage? If yes, who covered your event? (Please attach a brief summary or copies of articles.)	
Using the following scale, please rate the following kit materials.	
	Very Useful Useful Somewhat Useful Not Useful
Promotional Event Ideas	
Sample Proclamations	
Sample Press Release	
Sample Media Advisory	
Sample Op-Ed	
Radio Public Service Announcements (live announcer reads)	
Logo Sheet	
Letterhead	
General Facts About Drug & Alcohol Addiction, Treatment, Recovery, & Use	
Community-Based Organizations Serving Children and Families	
Educators/Schools	
Employers	
Health Policymakers and Insurers	
Health Professionals	
Individuals Working in the Criminal Justice System	
Faith Community	
Organizations Serving Racial, Ethnic, and Cultural Groups	
Planning Partners	
Allied Organizations	
Clearinghouses, Web Sites, and Additional Resources	
Single State Agency (SSA) Directory	
Diversity Resources	

Please mail this form to: *National Alcohol and Drug Addiction Recovery Month*, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment, Office of Communication and External Liaison, Rockwall II Building, Suite 621, 5600 Fishers Lane, Rockville, MD 20857. You may also fax this survey to 301-443-7801. We appreciate your efforts to provide this valuable feedback.

National Alcohol
& Drug Addiction
Recovery Month